



**State of Rhode Island
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2023

1. Corporate ID No. 000030257

2. Name of Corporation Transition House, Inc.

3. State of Incorporation

State: RI

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code
624190

4. Principal Office Address

No. and Street: 15 PARKER STREET
City or Town: LINCOLN State: RI Zip: 02865 Country: USA

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

RESIDENTIAL CARE FACILITY

6. Names and Addresses of the Officers and Directors:

All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
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PRESIDENT	MATTHEW E. TOMELLINI	46 ATLANTIC AVENUE MISQUAMICUT, RI 02891 USA
TREASURER	MATTHEW E TOMELLINI	46 ATLANTIC AVENUE MISQUAMICUT, RI 02891 USA
SECRETARY	JOHN TOMELLINI	46 ATLANTIC AVENUE MISQUAMICUT, RI 02891 USA
VICE PRESIDENT	JOHN TOMELLINI	46 ATLANTIC AVENUE MISQUAMICUT, RI 02891 USA
DIRECTOR	MATTHEW E TOMELLINI	46 ATLANTIC AVENUE MISQUAMICUT, RI 02891 USA
DIRECTOR	JOHN TOMELLINI	46 ATLANTIC AVENUE MISQUAMICUT, RI 02891 USA
DIRECTOR	ALEXANDAR PASKIC	120 80TH ST, APT 3C NEW YORK, NY 10024 USA

7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

REGISTERED AGENTS INC 47 WOOD AVENUE, SUITE 2 BARRINGTON , RI 02806

8. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 20 Day of April, 2023 at 5:29:39 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By MATTHEW E. TOMELLINI
Signature of Authorized Person

Form No. 631
Revised 09/07

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